POLICY AND PROCEDURE

POLICY TITLE:	POLICY #: DSAMH031
EEU Involuntary Placement Process	
PREPARED BY:	DATE ISSUED:
Eligibility & Enrollment Unit	6/6/22
RELATED POLICIES:	REFERENCE:
DSAMH032 EEU Voluntary Placement Process	Delaware Commitment Laws:
Policy	http://delcode.delaware.gov/title16/c051/sc02/ind
DSAMH033 EEU Red Flags Policy	<u>ex.shtml</u>
DATES REVIEWED:	DATES REVISED:
6/6/22	N/A
APPROVED BY:	NOTES:
CocuSigned by:	□DSAMH Internal Policy
Journa Champney	☑DSAMH Operated Program
1B71C05196B24CA	☑DSAMH State Providers
	☑Delaware Psychiatric Center
6/15/2022 8:01 AM PDT	☐Targeted Use Policy (Defined in scope)

I. PURPOSE:

The purpose of this policy is to provide guidance on referring Delaware residents who are eighteen (18) years of age or older who are involuntarily committed to inpatient psychiatric care.

II. POLICY STATEMENT:

It is the policy of DSAMH's Eligibility and Enrollment Unit (EEU) to ensure that all Delawareans who require involuntary inpatient psychiatric treatment are treated fairly and according to Delaware law.

III. **DEFINITIONS**:

"ACT" means Assertive Community Treatment.

"CRISP" means Community Reintegration Support Program.

"DTRN" means the Delaware Treatment and Referral Network.

"ED" means emergency department.

"EEU" means the DSAMH Eligibility and Enrollment Unit.

"IBHA" means initial behavioral health assessment

"ICM" means Intensive Case Management

"RRC-E" means the Recovery Response Center located in Ellendale

"RRC-N" means the Recovery Response Center located in Newark

IV. SCOPE:

The policy covers all community providers, IMDs, DPC, and Mental Health Screeners referring and accepting clients.

V. PROCEDURES/RESPONSIBILITIES:

- A. All involuntary 24-hour commitments must be processed by the EEU.
- B. Referrals are received via the Delaware Treatment and Referral Network (DTRN).
- C. Individuals or programs without DTRN access can fax referrals to 302-622-4162.
- D. Staff will ensure that the 24-Hour Detention or Provisional Commitment is completed per Department of Justice standards. If it is not, staff will contact the referral source, explain the error, and request that it be resubmitted before the client can be referred to a facility.
- E. The following information shall be included in all referral packets for involuntary admissions (24-Hour Detention or Provisional):
 - Referral packet from ED must include:
 - a. Demographic sheet,
 - b. ED Physician Report,
 - c. Psychiatric Assessment/Evaluation, and
 - d. 24-Hour Emergency Detention completed by a Certified Mental Health Screener or psychiatrist.
 - 2. Referral packet from Community, ACT, ICM, CRISP, or Group Home must include:
 - a. Proof of insurance status,
 - b. IBHA or current psychiatric documentation supporting need for inpatient placement,
 - c. Current medication list or most recent MAR, and
 - d. 24-Hour Emergency Detention completed by a Certified Mental Health Screener or psychiatrist.
 - 3. Referral packet from inpatient medical units must include:
 - a. Proof of insurance status,
 - b. Demographic sheet,
 - c. History and Physical,
 - d. Psychiatric Evaluation in lieu of the IBHA,
 - e. Current medication list or most recent MAR, and
 - f. 24-Hour Emergency Detention completed by a Certified Mental Health Screener or psychiatrist.
 - 4. Referral packet from RRC-N and RRC-E must include:
 - a. Proof of insurance status,
 - b. Admission demographics,
 - c. Psychiatric evaluation in lieu of the IBHA,
 - d. Current medication list or most recent MAR, and

- e. 24-Hour Detention completed by a Certified Mental Health Screener or psychiatrist, or Provisional completed by psychiatrist and accompanied by the 24-Hour Detention that preceded the Provisional.
- 5. Make a referral to receiving psychiatric facility. Facilities to include: Recovery Response Center-Newark (RRC-N), Recovery Response Center-Ellendale (RRC-E), Delaware Psychiatric Center (DPC), Rockford Center (RFC), MeadowWood (MW), Dover Behavioral Health (DBH), and SUN Behavioral Health.
- F. If any of the information listed above in Section V. E. is missing, it may delay the approval of the referral and placement of the client.
- VI. **POLICY LIFESPAN**: Annual review by policy committee.

VII. **RESOURCES**:

Initial Behavioral Health Assessment

24-Hour Emergency Detention

Psychiatrist Certificate for Provisional Hospitalization